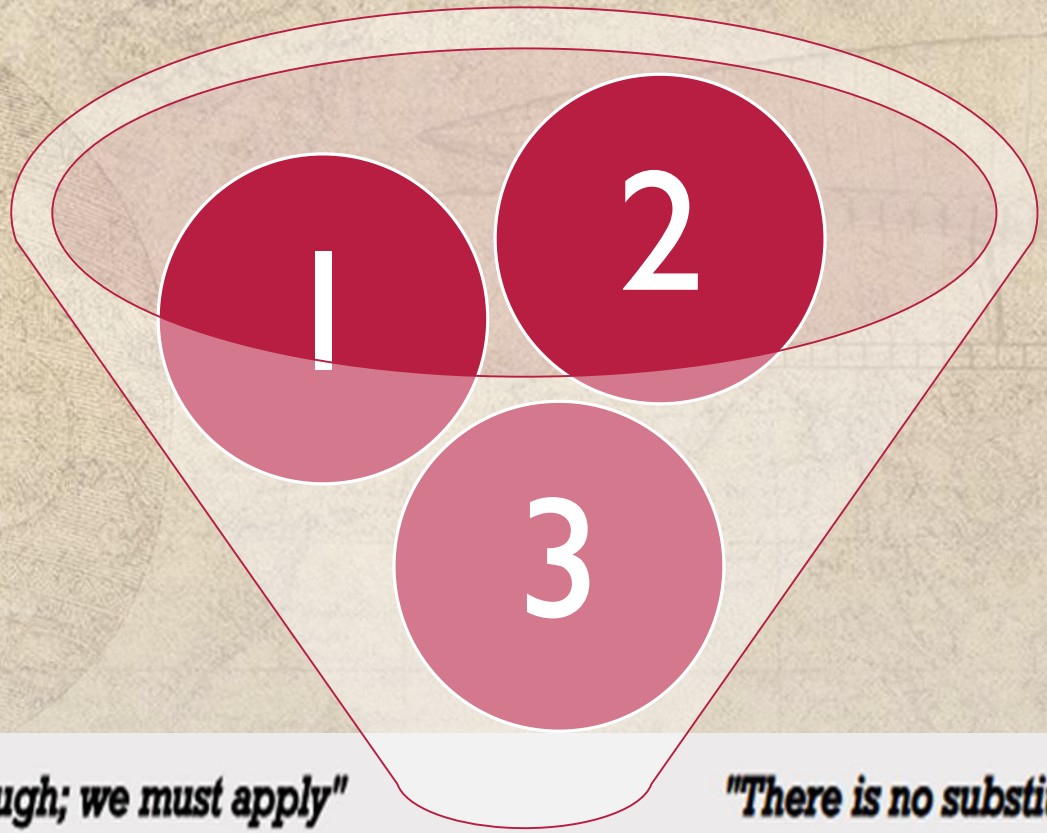
Disampaikan pada
pelatihan preceptorship
RS Kariadi, 24 April 19



"Knowing is not enough; we must apply"
Goethe

"There is no substitute for knowledge"
Deming

LECTURES
CLINICAL INSTRUCTURE

MY INVENTION

FROM EVIDENCE TO CHANGE IN NURSING EDUCATION

SUHARTINI

DOSEN DEPARTEMEN ILMU KEPERAWATAN FK UNDIP

SUB DIVISI KEPERAWATAN GAWAT DARURAT DAN KRITIS

MY VITAE

- **Name : Suhartini**
- **Educational background: Philosophy Doctor in Nursing Science**
- **Mayor : Emergency and Critical Care Nursing; Holistic Nursing**
- **Position: Assistant professor**

MY INVENTION

4
Improvement
Bundle care
Changes

3
Publication
as evidence
& innovation
sources

2
Research
interest

1
Knowledge
Concepts
Phenomena

INVENTION -- FROM EVIDENCE TO CHANGE

CHANGES

KNOWLEDGE BASED

WHO WILL USE MY INVENTION

Who benefits from this invention? Why?

- Nurses in Hospital or other services
- Leaders and managers
- Health science students (nursing students, medical students, etc)
- Patients and their families

INVENTION MATERIALS -- EXAMPLES

Materials used for invention build

conventional

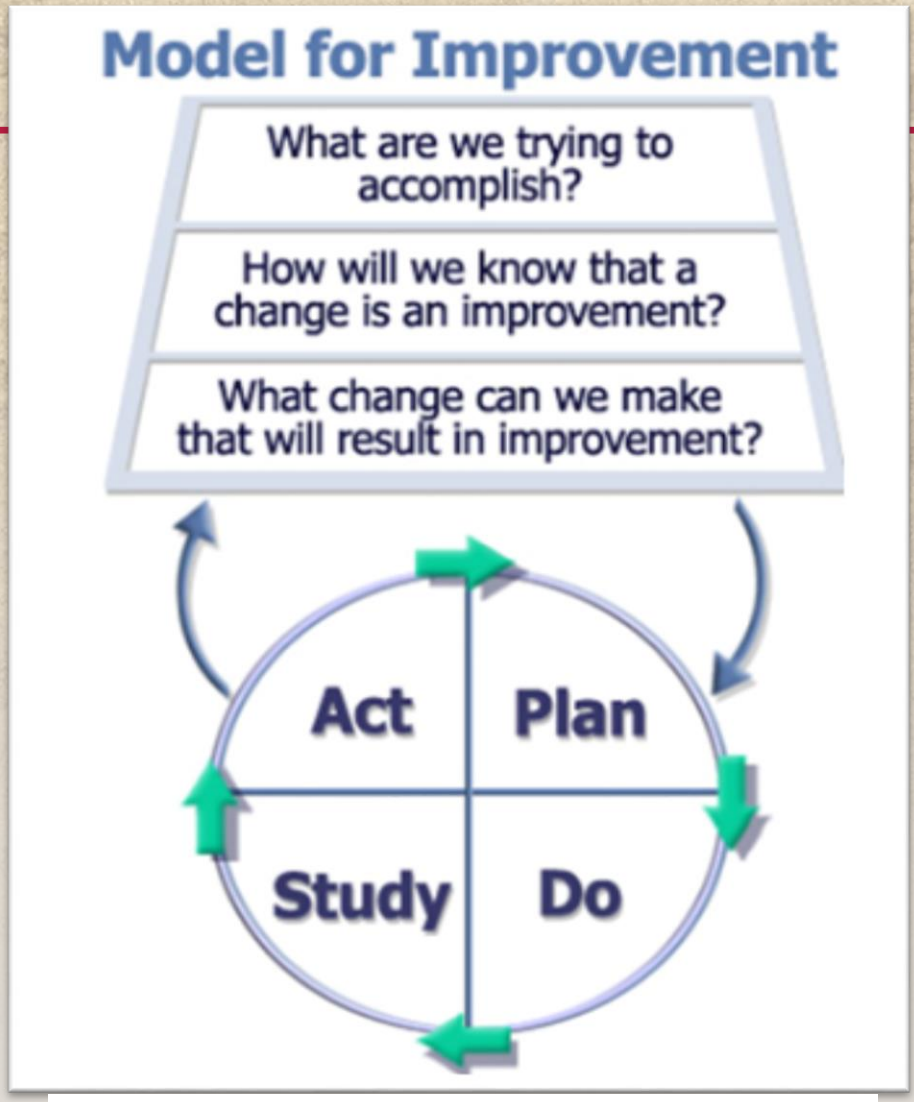
- Machine – conventional
- Technology – quite smart
- Technology information --- PDA to smartphone
- Body Censored
- Cloud based – web based data
- Robotic

sophisticated

INVENTION DESIGN PROCESS

W. Edwards Deming devoted much of his life to developing and teaching a new theory of management and improvement that he called the System of Profound Knowledge. It's components are the following:

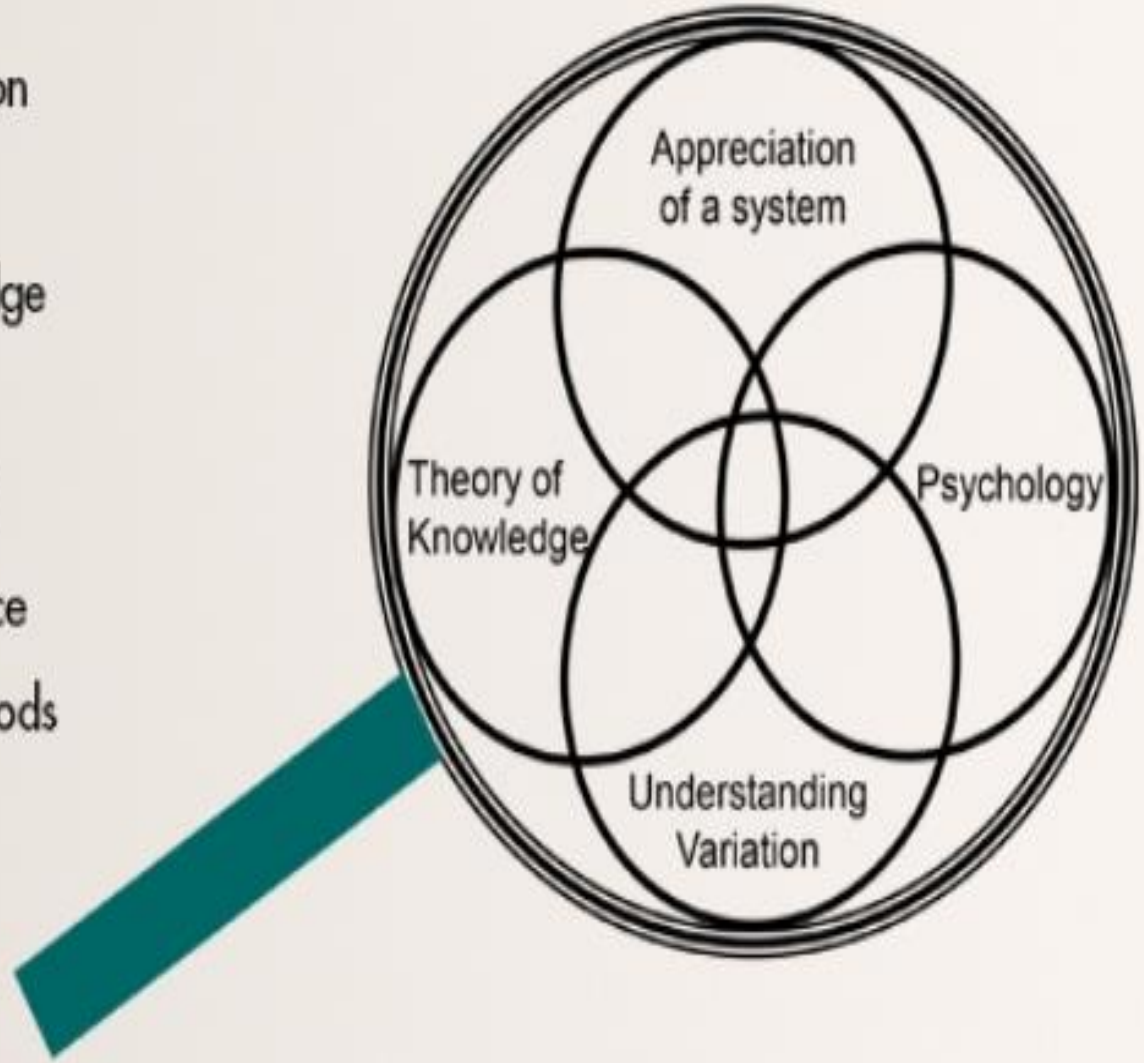
- appreciation of a system,
- psychology,
- theory of knowledge, and
- understanding variation.



Associates in Process Improvement (API)

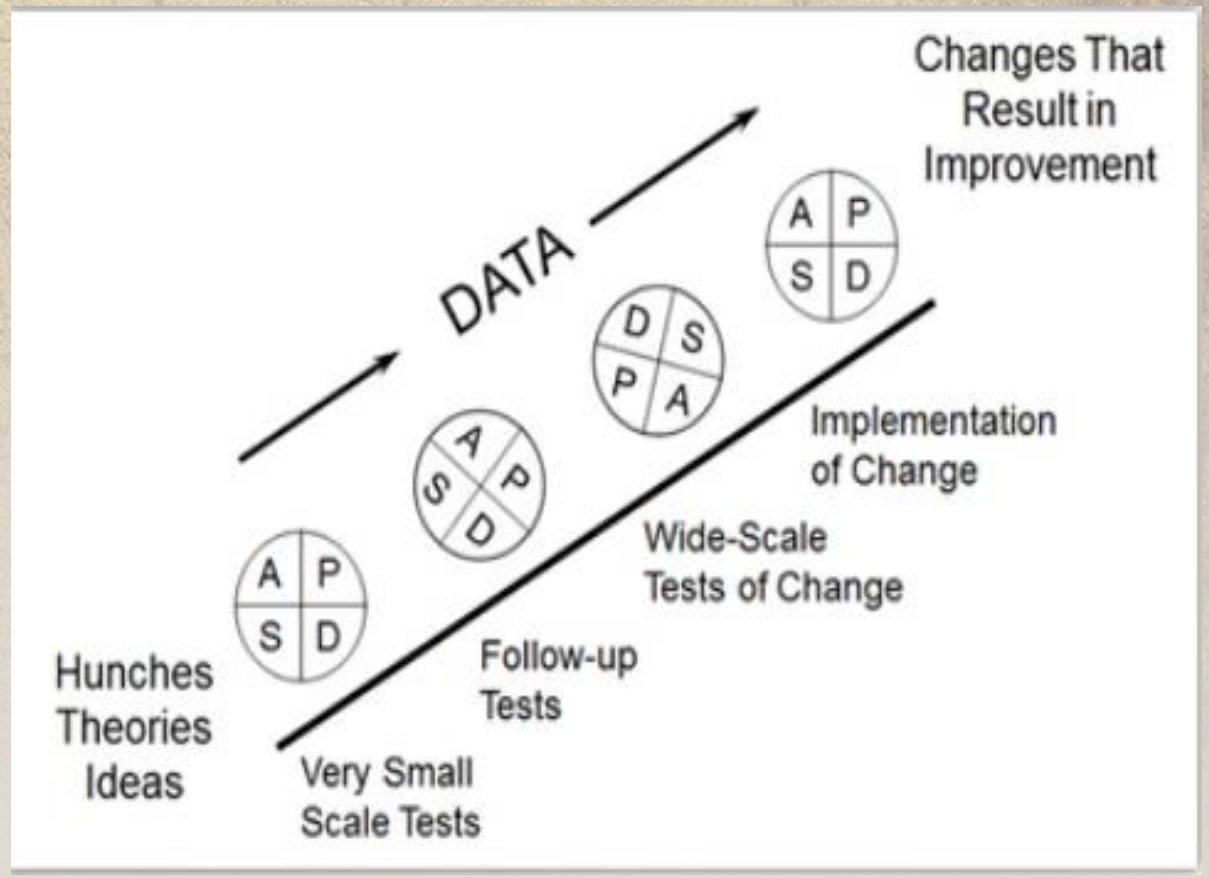
THE SCIENCE OF IMPROVEMENT

The science of improvement includes the interaction of systems thinking, understanding variation, psychology of change, and the theory of knowledge that are applied to improve the performance of processes, products, services, organizations, and communities. The proper application of this science requires integration of a set of improvement methods and tools with knowledge of subject matter to develop, test, implement, and spread changes.



PDSA Cycle

Questions drive testing, which is at the heart of science; informed action drives improved results



MY INVENTION IN USE!

Talk about how people reacted to your invention

- Do it solve the problem/need you identified?
- Do it work as planned? Did it help whom it needed to help?

Think Do Act

Think Do Act

Think Do Act

SPREAD OF EBNP FOR CHANGING

Hunt J. Indicators for nursing practice: the use of research findings. J Adv Nurs 1981;6:189–94. 2 Gortner SR, Bloch D, Phillips TP.
Contributions of nursing research to patient care. J Adv Nurs 1976;1:507–18. 3
Roper N. Justification and use of research in nursing. J Adv Nurs 1977;2:365–71. 4
Royle JA, Blythe J, Ingram C, et al. The research utilisation process: the use of guided imagery to reduce anxiety. Canadian Oncology Nursing Journal 1996;6:20–5. 5
Mitchell A, Janzen K, Pask E, et al. Assessment of nursing research utilization needs in Ontario health agencies. Can J Nurs Admin 1995;8:77–91. 6
Haynes RB, Sackett DL, Gray JAM, et al. Transferring evidence from research into practice. 1.
The role of clinical care research evidence in clinical decisions [editorial]. ACP Journal Club 1996 Nov-Dec;125:A14–6. 7
White S. Evidence-based practice and nursing: the new panacea? British Journal of Nursing 1997;6:175–7.

WHAT ABOUT INDONESIA ??

WHAT ABOUT CENTRAL JAVA??

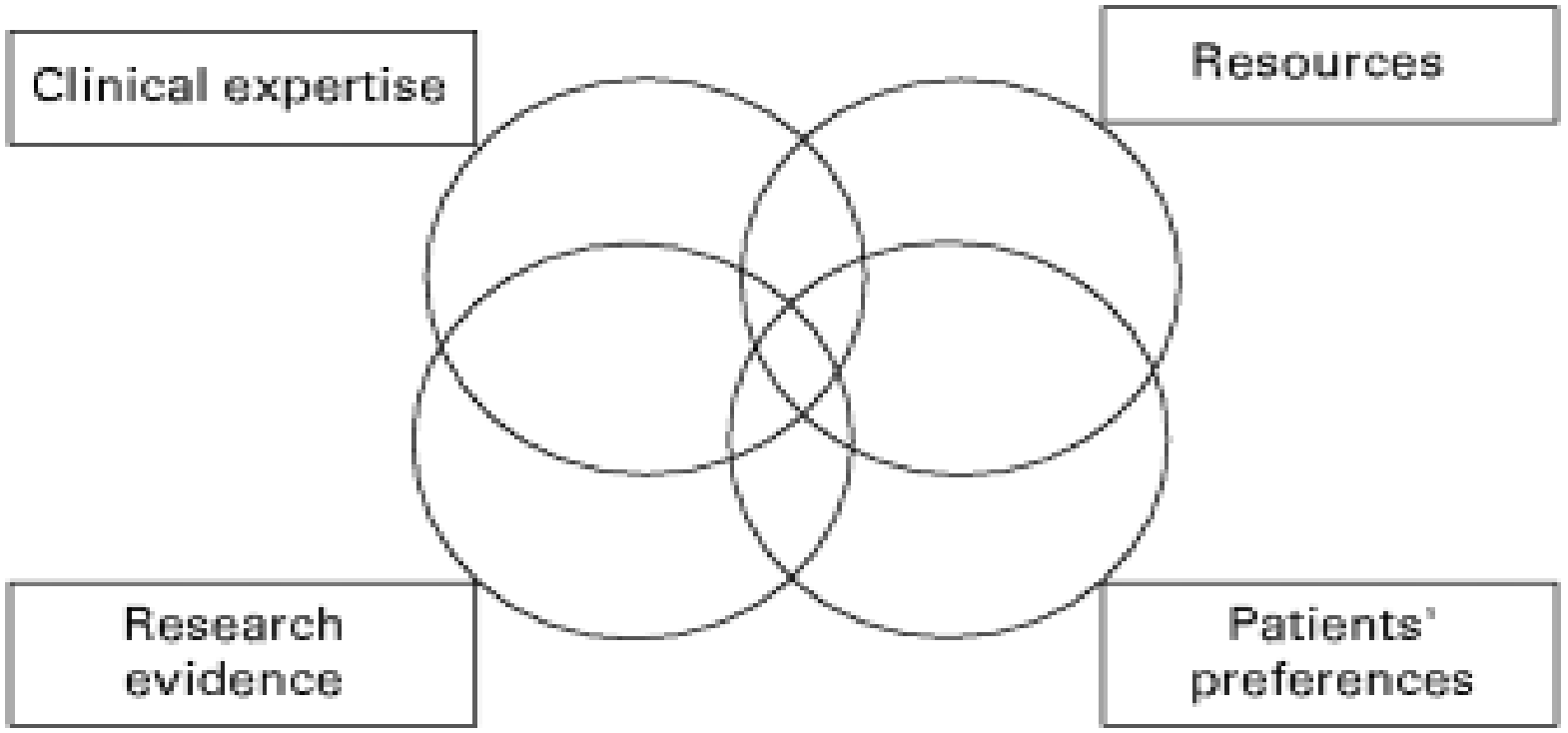
APLLY AND SPREAD EBNP FOR CHANGING

Note:

(1) evidence-based practice isn't new: it's what we have been doing for years,

(2) evidence-based nursing leads to "cookbook" nursing and a disregard for individualized patient care

CHECKING A CASE



A model for evidence-based clinical decisions (adapted from Haynes et al.[6])

CONCLUSION

Our task now and on going :

- MY INVENTION
- YOUR INVENTION
- WELCOME EBNP

QUESTION AND ANSWERS ARE WELCOME